



RECOGNIZING ADDICTIVE BEHAVIORS

“I Can Stop Anytime.”

Facing Up to Addiction

Dave smokes. He says it's a social habit, not an addiction, and that he could stop if he really wanted to. He's gone without cigarettes for a few days at a time, but he gets headaches and feels irritable, so he's decided he'll quit for good some time down the road. “I'm young,” he says, “and I don't even smoke a pack a day. I'll probably quit when I turn 30.”

Is Dave addicted? Just what does “addiction” mean, anyway?

Simply put, addiction is a chronic compulsion to repeat a behavior despite negative consequences, characterized by:

- a craving for more of the substance, drug or behavior
- increased physiological tolerance
- withdrawal symptoms in the absence of the stimulus
- repeated and failed attempts to stop

There are many theories about what causes addiction – the disease model, the genetic model and the cultural model, to name a few – and an even greater number of opinions on what behaviors qualify as addictions. Drug addiction, including alcoholism and addiction to nicotine, is the most significant, in terms of public health; but compulsive gambling, eating, sex, Internet-use, and even compulsive exercising or working are sometimes considered addictions as well.

Can't Stop + Negative Consequences?

Get Help!

Regardless of semantics, it seems logical that if you can't stop doing something after trying on your own to quit, and it's having negative consequences, then you should seek help. Logical, maybe, but easier said than done.

Taking the first few steps toward recovery – facing up to one's addiction and enlisting help – is complicated by the very nature of addictive behavior:

- An addicted person is seldom objective. Like the fictional Dave, real addicts often tell friends and family, “I could stop anytime if I wanted to.” They are also likely to deny, minimize or rationalize the negative effects of their behavior.
- Someone who is under the influence of drugs or alcohol – or obsessing over how to get the next high – is often incapable of making rational decisions or following through on good intentions.

“You've Changed.”

Many addicts have heard this and think the speaker is off the mark. If someone close to you has confronted you or expressed concern about changes to your personality or behavior, try to step into his shoes and take an objective look at yourself:

- Are you preoccupied with the substance or behavior?
- Do you go to great lengths to get it, spending more money than you can afford or more time than you'd spend doing other errands? Are you borrowing money or breaking the law to get it?
- Are you hurting people you love when under the influence? Or by choosing the substance or behavior over them?
- Are you neglecting responsibility? Is the behavior affecting work or your financial situation?
- Are you less social? More withdrawn? Moody?
- Do you need more of the substance or behavior than you used to in order to get the same effect?

- When you don't get it soon enough, do you experience withdrawal symptoms?
- Have you tried to quit and failed?

Consider your answer to these questions alongside the definition of addiction. Also consider the negative effects of your behavior, in terms of your physical and mental health, your relationships with others, and your work, life and financial goals. If you are completely honest with yourself, you usually know deep down if you need help.

Getting Help

Asking someone close to you for support can jumpstart your recovery. But addiction can be extremely difficult to beat, and it's important to get professional help as early as possible when you need it. Your Employee Assistance Program (EAP) is a great resource: a qualified intake specialist is available to take your call 24 hours a day, seven days a week. Your initial call and subsequent counseling are confidential, and there is no cost to you. (If you need ongoing care or services beyond the scope of your EAP, you will be transitioned to your behavioral health plan. Deductibles and copayments may apply. Call your company's benefits officer or refer to your plan documents for details.)

Individuals who are not covered by an Employee Assistance Program should talk to a doctor, call a local public health clinic, or contact a recovery program such as Alcoholics Anonymous or Narcotics Anonymous.

What Happens Next

For substance abuse, the first step is detoxification. For a mild addiction, this can be an unassisted initial period of abstinence. For stronger physiological dependence, drugs may be required to reduce withdrawal symptoms. Sometimes a surrogate for the abused substance is used to help wean the addict off the drug or other substance. Acupuncture detoxification is an option, as well.

For the long haul, behavioral therapy is key. Whether in a 12-step program or another behavioral health program, an addict needs to confront his addiction and make a concerted decision to live without the stimulus. He needs to learn about cues and triggers tied to the behavior, how to recognize and avoid them, and what to do when they cannot be avoided. Adopting alternative behaviors that are healthy or neutral to take the place of the unhealthy behavior is another common element of recovery.

Cognitive therapy, which helps the addict change the way he thinks, is also important and is often combined with behavioral therapy. It can teach a person, for example, that he can get through difficult situations without a drug when he currently thinks there's no way he can live without it; or that he's a good person instead of someone who deserves the negative consequences of his actions.

For most recovering addicts, controlling addiction is a lifelong effort. Behavioral and cognitive therapy both teach techniques that can be used over the long term, and the ongoing support of friends, family and/or support groups can make a world of difference.

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